

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001978

FILED
Mar 04, 2005
Secretary of State

Entity Name: ORTEGA RIVERPLACE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

6833-3 PHILLIPS INDUSTRIAL BLVD
JACKSONVILLE, FL 32256

New Principal Place of Business:

4003 HARTLEY ROAD
JACKSONVILLE, FL 32257

Current Mailing Address:

6833-3 PHILLIPS INDUSTRIAL BLVD
JACKSONVILLE, FL 32256

New Mailing Address:

4003 HARTLEY ROAD
JACKSONVILLE, FL 32257

FEI Number: 03-0448716

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIGNATURE REALTY, BRYAN CANTRELL
4003 HARTLEY ROAD
JACKSONVILLE, FL 32257 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FINN, JOHN K
Address: 6833-3 PHILLIPS INDUSTRIAL BLVD
City-St-Zip: JACKSONVILLE, FL 32256

Title: VTD () Delete
Name: FINN, JANICE E
Address: 6833-3 PHILLIPS INDUSTRIAL BLVD
City-St-Zip: JACKSONVILLE, FL 32256

Title: SD () Delete
Name: ZENTKO, EUGENE
Address: 6833-3 PHILLIPS INDUSTRIAL BLVD
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FINN, JOHN

PD

03/04/2005

Electronic Signature of Signing Officer or Director

Date